## UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 239575US25CONT

First Inventor or Application Identifier

Johann J NEISZ

Registration No.:

45,265

Title IMPLANTABLE ARTICLE AND METHOD

Assignee Name: Assignee Address: American Medical Systems 10700 Bren Road West Minnetonka, Minnesota 55343 10/61692F

		<del></del>								
	See	APPLICATION ELEMENTS  MPEP chapter 600 concerning utility patent application contents	Commissioner for Patents  ADDRESS TO: Mail Stop Patent Application Alexandria, Virginia 22313							
1.		Fee Transmittal Form (e.g. PTO/SB/17)	ACCOMPANYING APPLICATION PARTS							
		(Submit an original and a duplicate for fee processing)	7. Assignment Papers (filed in parent S.N. 09/917,562 on 07/27/01 at Reel/Frame: 012118/0635)							
2.		Specification Total Sheets 67	8. Application Data Sheet. See 37 CFR 1.76							
			9.   37 C.F.R. §3.73(b) Statement Power of Attorney							
3.		Drawing(s) (35 U.S.C. 113) Total Sheets 61	10. ☐ English Translation Document (if applicable)							
			11. Information Disclosure Statement (IDS)/PTO-1449 (filed in parent S.N. 09/917,562 on 07/27/01)							
4.		Oath or Declaration Total Pages 3	12. Preliminary Amendment							
	a.	☐ Newly executed (original or copy)	13. White Advance Serial No. Postcard							
	b.	Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 17 completed)	14. ☐ Certified Copy of Priority Document(s)  (if foreign priority is claimed)							
		<ul> <li>i. DELETION OF INVENTOR(S)         Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).     </li> </ul>	15.  Applicant claims small entity status.  See 37 CFR 1.27							
5.		CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	16. Other: Confirmation of Attorney and Correspondence Address							
6.		Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	Revocation and New Appointment of Power of Attorney							
	a.	☐ Computer Readable Form (CRF)								
	b.	Specification or Sequence Listing on :								
		i. CD-ROM or CD-R (2 copies); or								
		ii. Paper								
	c.	Statements verifying identity of above copies								
17.	If a	CONTINUING APPLICATION, check appropriate box, and suppl								
	■ Continuation □ Divisional □ Continuation-in-part (CIP) of prior application no.: 09/917,562									
i		application information: Examiner: Gilbert	Group Art Unit: 3736							
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.										
18. /	4me	nd the specification by inserting before the first line the se	ntence:							
☐ This application is a ☐ Continuation ☐ Division ☐ Continuation-in-part (CIP)										
		pplication Serial No. Filed on								
	This	application claims priority of provisional application Seria								
19. CORRESPONDENCE ADDRESS										
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(703) 413-3000 FACSIMILE: (703) 413-2220										
	Na	me: Charles L. Gholz	Registration No.: 26,395							
S	gna	ture: W. Maddl Mohu	Date: July 11, 2003							

ocket No.

239575US25CONT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Johann J NEISZ, et al.

SERIAL NO:

New Application

FILING DATE: Herewith

FOR:

IMPLANTABLE ARTICLE AND METHOD

## FEE TRANSMITTAL

COMMISSIONER FOR PATENTS ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED		NUMBER EXTRA	RATE			CALCULATIONS
TOTAL CLAIMS	30 - 20	=	10	х	\$18	=	\$180.00
INDEPENDENT CLAIMS	1 - 3	=	0	х	\$84	_	\$0.00
☐ MULTIPLE DEPENDE	MULTIPLE DEPENDENT CLAIMS (If applicable)						\$0.00
☐ LATE FILING OF DEC	+	\$130	=	\$0.00			
	EE	\$750.00					
l	NS	\$930.00					
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- ☐ Please charge Deposit Account No. <u>15-0030</u> in the amount of **\$0.00** A duplicate copy of this sheet is enclosed.
- A check in the amount of \$930.00 to cover the filing fee is enclosed.
- The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND, MAIER & NEUSTADT, P.C.

Date: 67/09/03

Tel. (703) 413-3000 Fax. (703) 413-2220 (OSMMN 05/03)

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